REST AVAILARIF COPY

Effective October 1, 2001 CLAIMS AS FILED - PART I						=/0	1181	()/}	11
	CLAIM				SMAI	L ENTITY	/ \ / \		ين ،
TOTAL CLA	JMS -	(C	olumn 1)	(Column 2)	TYPE		O	OTH IAMS F	ER TH LENT
FOR		NUI	MBER FILED	NUMBER EXTRA	RAT		-4	RATE	
TOTAL CHARGEABLE CLAIMS		vs 7	:ninus 20= *		1 -	7-	— OF	BASIC F	EE 74
INDEPENDENT CLAIMS		1	minus 3 =		X\$ 9		OF	X\$18:	4
MULTIPLE DE	PENDENT CLA	IM PRESEN		П	X42:	-	OF	X84=	
If the differe	nce in column	1 is less tha	an zero, enter "O"	in column 2	+140		OR	+280=	
11.1.			DED - PART II		TOTA	L	OR	TOTAL	
11/1/10/2	(Column	1)	(Column 2		SMAL	L ENTITY	OR	OTHE	R THA
Total Independer	REMAININ AFTER AMENDMEI	IG .	HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONA FEE		RATE	AD TIOI FE
Total	1.		1716	2 -	X\$ 9=		OR	X\$18=	
FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CLA	JE JA	X42=		OR	X84=	
					+140=		OR	+280=	
3-16-00	9 10-1				TOTAL ADDIT. FEE		OR	TOTAL ODIT. FEE	
	CLAIMS		(Column 2)	(Column 3)					
	REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADD
Total Independent	+7-	Minus	- 20	: 0	X\$ 9≅		OR	X\$18=	_FE
		Minus MULTIPLE D	EPENDENT CLAIR	0	X42=		OR	X84=	0
•		•			+140=		OR	+280=	0
					TOTAL ADDIT, FEE		OR A	TOTAL DIT. FEE	0
	(Column 1)	•	(Column 2)	(Column 3)				OII. FEEL	
	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL	Γ	RATE	ADDI
Total	•	Minus	PAID FOR			FEE	- -		FEE
ndependent		Minus	***		X\$9=		OR 2	(\$18=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	X84=	
IRST PAESE	the entry in column 1 is less than the entry in column 2, write '0' in column 3.								
he entry in colu	MA 1 is less than a	na antes to a co	umn 2, write '0' in co		+140=	la	OR +	280=	